



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

Clay Co. Detention Center, Liberty

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 204160	DATE OF INSPECTION 6/30/2009
LOCATION OF INSTRUMENT (STREET AND CITY) 2920 North Shamrock Rd. Jefferson City, MO 65101	TIME OF INSPECTION 7:26

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER +50°C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> TIME AND DATE 7:30 6/30/2009	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C) +34.00°C	
<input checked="" type="checkbox"/> CALIBRATION CHECK - Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)	
<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)	

TEST 1 .100	TEST 2 .100	TEST 3 .100
--------------	--------------	--------------

<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED)											
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)											
REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(Over .19)	0

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

Upgraded firmware from version 12/15/99 to version 02/07/2009.

Guth Laboratories, lot #08340, expiring 10/15/2009

INSPECTING OFFICER	
SIGNATURE 	PRINT NAME Terry L. Carroll
TYPE II PERMIT NUMBER/EXPIRATION DATE 920079 4/22/2011	TELEPHONE NUMBER (573) 751-4722



GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-684-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08340** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1211** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **October 15, 2009** at **11:59 PM**.

When used in a calibrated Simulator, operating at **34°C +/- .2°C**, this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 202014
06/30/09
09:20

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS
SAMPLE CHAMBER: 50c

FLOW DETECTOR: OKAY

PUMP
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!""#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGHI
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefgijklmnop
qrstuvwxyz{|}~

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435 MANASSAS, VA 20108

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 202014
06/30/09

TESTING OFFICER:
CARROLL/TERRY/L
OFFICER I.D.: C69
PERMIT NUMBER: 920079
EXPIRATION DATE: 04/22/11
MISCELLANEOUS DATA:
.04 CAL. CHECK

--- SUPERVISOR MODE ---

BLANK TEST	.000	09:49
INTERNAL STANDARD	VERIFIED	09:49
EXTERNAL STANDARD	.039	09:49
BLANK TEST	.000	09:50
EXTERNAL STANDARD	.038	09:50
BLANK TEST	.000	09:51
EXTERNAL STANDARD	.039	09:51
BLANK TEST	.000	09:52

N = 3
SIM. = .1
AVG. = .0386

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 202014
06/30/09

ARREST TIME: 01:00
SUBJECT NAME:
DOE/JON
DOB: 01/02/03 SEX: M
STATE/D.L.: MO/12345
ARRESTING OFFICER:
CARROLL/TERRY/L
OFFICER I.D.: C69
TESTING OFFICER:
CARROLL/TERRY/L
OFFICER I.D.: C69
PERMIT NUMBER: 920079
EXPIRATION DATE: 04/22/11
MISCELLANEOUS DATA:
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	09:58
INTERNAL STANDARD	VERIFIED	09:58
RADIO INTERFERENCE		

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



TERRY L CARROLL

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 04/22/09
Number 920079
Expires 04/22/2011

John J Mathewson

Director of State Public Health Laboratory

Margaret T. Donnelly

Director, Department of Health